



**Licensed Mental Health Counselors,
Licensed Masters of Social Work, and
Licensed Marriage and Family Therapists**

**Sample Fee Schedule
July 1, 2005**

This sample fee schedule of commonly billed procedure codes includes maximum allowances for licensed mental health counselors, licensed masters of social work and licensed marriage and family therapists for dates of service on or after July 1, 2005.

Basis for Maximum Allowances

The maximum allowances were excerpted from the July 1, 2005 *Uniform Medical Plan Professional Provider Fee Schedule*, and adjusted to reflect the 10% payment differential that applies to this provider type. The majority of the fee schedule is based on the Resource Based Relative Value Scale (RBRVS) methodology. The maximum allowances are calculated using the Centers for Medicare and Medicaid Services (CMS) 2005 relative value units (RVUs), CMS statewide Geographic Practice Cost Indices (GPCIs) for Washington State, and the UMP conversion factor of \$50.00.

Non-Facility and Facility Setting Maximum Allowances

The fee schedule includes two maximum allowance columns. The **non-facility setting** maximum allowances apply to professional services performed in all settings, with the exception of ambulances, ambulatory surgery centers, licensed birthing centers, hospice facilities, community mental health centers, hospitals, military facilities, Indian health facilities, Tribal facilities, and skilled nursing facilities. In these settings, the **facility setting** maximum allowances are applicable.

Codes and Descriptions

The UMP fee schedule uses Current Procedural Terminology (CPT™) and the Healthcare Common Procedure Coding System (HCPCS). The descriptions for the CPT™ and HCPCS Level II codes listed are abbreviated. For billing purposes, please use the most recent edition of the CPT™ and HCPCS Level II coding books, which include complete descriptions of the codes.

Coverage and Payment

The procedure codes and corresponding fees listed in this document do not necessarily indicate coverage or payment. All coverage and payments are subject to plan benefits, exclusions, limitations, and pre-authorization requirements. Outpatient mental health treatment is limited to 20 visits per calendar year. Please consult the UMP *Certificates of Coverage* for complete coverage details. The UMP *Billing and Administrative Manual for Professional Providers* (including the *Certificate of Coverage*) will be sent to you upon approval of your preferred provider status.

The UMP pays 90% of either the maximum allowance indicated or billed charges, whichever is less.

Visit the UMP web site at www.ump.hca.wa.gov/provider/ to download copies of all UMP publications mentioned in this document. If you have any questions, please call (206) 521-2023 (within the Seattle area) or toll free at 1-800-292-8092.

Fee Schedule Updates and Corrections

The UMP fee schedule is generally updated annually on July 1.

Fees in this publication are subject to change without notice. Although we make every effort to ensure the accuracy of the fees in our publications, changes or corrections may occur throughout the year.

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Psychotherapy Services			
Code	Brief Description	Maximum Allowances as of 7/1/05	
		Non-Facility Setting	Facility Setting
90801	Psy dx interview	\$182.70	\$171.45
90804	Psytx, office, 20-30 min	\$78.30	\$72.90
90806	Psytx, off, 45-50 min	\$117.90	\$113.40
90808	Psytx, office, 75-80 min	\$175.50	\$169.65
90847	Family psytx w/patient	\$139.05	\$136.35
90853	Group psychotherapy	\$38.70	\$37.80

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